



UNITED STATES DISTRICT COURT  
CENTRAL DISTRICT OF CALIFORNIA

11 DELFINO VEGA RODRIGUEZ, ) Case No. ED CV 15-0340 JCG  
12 Plaintiff, )  
13 v. ) **MEMORANDUM OPINION AND  
14 CAROLYN W. COLVIN, ) ORDER  
15 COMMISSIONER OF SOCIAL )  
16 SECURITY ADMINISTRATION, )  
17 Defendant. )**

---

18 Delfino Vega Rodriguez (“Plaintiff”) challenges the Social Security  
19 Commissioner (“Commissioner”)’s decision denying his application for disability  
20 benefits. Plaintiff contends that the Administrative Law Judge (“ALJ”) erred at step  
21 two by finding that Plaintiff’s impairments in his lower extremities were not severe.  
22 (See Joint Stipulation (“Joint Stip.”) at 4-11, 15-16; Administrative Record (“AR”) at  
23 21.) For the reasons discussed below, the Court finds that reversal is not warranted.

24 As a general matter, step two serves as a ““*de minimis* screening device to  
25 dispose of groundless claims.”” *Edlund v. Massanari*, 253 F.3d 1152, 1158 (9th Cir.  
26 2001) (quoting *Smolen v. Chater*, 80 F.3d 1273, 1290 (9th Cir. 1996)).

1 To that end, preliminarily, step two requires that a claimant prove the existence  
 2 of physical or mental impairment with “medical evidence consisting of signs,  
 3 symptoms, and laboratory findings.” *Ukolov v. Barnhart*, 420 F.3d 1002, 1005  
 4 (9th Cir. 2005); 20 C.F.R. §§ 404.1508, 404.1527. Importantly, “[a] claimant’s  
 5 statements about his or her symptoms alone will not suffice.” *Gonzalez v. Colvin*,  
 6 2014 WL 3871198, at \*5 (E.D. Wash. Aug. 7, 2014); *accord Ukolov*, 420 F.3d at  
 7 1005; 20 C.F.R. §§ 404.1508, 404.1527; SSR 96-4p, 1996 WL 374187, at \*1 (1996).

8 Additionally, an impairment is “not severe” at step two when the “medical  
 9 evidence establishes only a slight abnormality” that “would have no more than a  
 10 minimal effect on an individual’s ability to work.” SSR 85-28, 1985 WL 56856, at \*3  
 11 (1985).

12 Here, the ALJ properly assessed Plaintiff’s impairments at step two for two  
 13 reasons.

14 First, there was a lack of medical evidence to support Plaintiff’s claim that the  
 15 alleged impairments affected his daily life.<sup>1</sup> For example, the ALJ noted that Plaintiff  
 16 (1) infrequently visited the doctor,<sup>2</sup> (2) was prescribed conservative medication  
 17 treatments for his knee pain, (3) required no emergency care, and (4) received neither  
 18 more aggressive treatment nor referral to a specialist. (See AR at 23, 33-35, 285, 340);  
 19 *see also Parra v. Astrue*, 481 F.3d 742, 751 (9th Cir. 2007) (“[E]vidence of  
 20 ‘conservative treatment’ is sufficient to discount a claimant’s testimony regarding

21

---

22 <sup>1</sup> The ALJ found that Plaintiff’s testimony about his symptoms was less than credible, partly because  
 23 Plaintiff’s testimony was often inaccurate and self-contradicting. (See AR at 21-23.) For instance,  
 24 Plaintiff claimed that he had taken diabetes medication since 2004, but testified that he was only  
 25 diagnosed with diabetes in 2007. (See *id.* at 21, 33-34.)

26 <sup>2</sup> In fact, in a period of over twelve months, Plaintiff underwent only one examination by a physician  
 27 for his foot condition. (See AR at 22, 326.) And while Plaintiff indicated that he was seeking  
 28 medical care in Mexico every two weeks, he provided no treating notes from a physician in Mexico.  
 (See *id.* at 21-22, 35, 337.)

1 severity of an impairment.”) (citation omitted); *Burch v. Barnhart*, 400 F.3d 676, 681  
 2 (9th Cir. 2005) (finding lack of consistent medical treatment “powerful evidence” that  
 3 claimant’s claims of severe pain were not credible); *O’Brien v. Comm’r Soc. Sec.*  
 4 *Admin.*, 2014 WL 6432830, at \*4-5 (D. Or. Nov. 13, 2014) (alleged severity of leg and  
 5 back pain symptoms not credible where claimant failed to seek treatment, made  
 6 inconsistent statements, and lacked corroborating objective medical evidence); *Harper*  
 7 *v. Comm’r Soc. Sec. Admin.*, 2012 WL 1131461, at \*8 (E.D. Cal. Mar. 30, 2012) (ALJ  
 8 properly rejected claimant’s testimony regarding alleged pain in part because no  
 9 emergency care was sought); *Troglia v. Astrue*, 2009 WL 3783191, at \*6 (E.D. Wash.  
 10 Nov. 9, 2009) (ALJ properly discredited claimant’s symptoms in part because claimant  
 11 received no referral to, or evaluation by, specialist).

12 Second, no medical opinions before the ALJ concluded that Plaintiff had  
 13 debilitating functional limitations that affected his ability to perform basic work  
 14 activities.<sup>3</sup> (*See* AR at 23, 43, 51, 208-09); *see also Townsend v. Colvin*, 2015 WL  
 15 6673677, at \*3 (C.D. Cal. Oct. 30, 2015) (impairment properly found not severe in part  
 16 because there were “no medical source statements in the record that support[ed]  
 17 [claimant’s] allegations as to the effect of her [lower-extremity impairment] on her  
 18 ability to do basic work activities.”).

19       ///

20       ///

21       ///

22       ///

23       ///

24

25

---

26       <sup>3</sup> Indeed, the ALJ relied on two medical consultants and both, in sum, concluded that Plaintiff’s  
 27 purported impairments *lacked* objective, evidentiary support. (*See* AR at 23, 42-44, 49-52.)

1 Based on the foregoing, **IT IS ORDERED THAT** judgment shall be entered  
2 **AFFIRMING** the decision of the Commissioner denying benefits.

3  
4 DATED: *12/1/2015*

5  
6 Hon. Jay C. Gandhi  
7 United States Magistrate Judge

8 \*\*\*

9  
10 **This Memorandum Opinion and Order is not intended for publication. Nor is it**  
**intended to be included or submitted to any online service such as**  
**Westlaw or Lexis.**

11 \*\*\*

12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28